

## **Teachers' Retirement System of the State of Kentucky**

479 Versailles Road Frankfort, KY 40601-3800 800-618-1687

## **TRS 4 Voluntary Contribution Agreement**

TRS 4 members may make voluntary contributions to the 403(b) tax-sheltered annuity program by entering into this agreement. Voluntary contributions are made only through payroll deduction and must be made from earnings paid for a TRS-covered position. See the TRS website at <a href="https://trs.ky.gov/active-members/trs-4-member-information/">https://trs.ky.gov/active-members/trs-4-member-information/</a> for more information.

Printe	d member name (First, m	iddle initial, last)	TRS Member ID	Primary phone number	
A 3.3	(Ch				
Address (Street/City/State/ZIP)					
	ect my employer to red plete one option only):	uce my earnings on a bef	ore-tax basis by the following	g amount (check and	
[ ]	[ ] \$ per pay period (enter a whole dollar amount); or				
[ ]	% per	er pay period (enter a whole percentage); or			
[ ]	The maximum amount the age 50 catch-up lin	nt permitted under the applicable dollar limit for each calendar year, increased by imit, if applicable.			
Important: These voluntary contributions and contributions to any other 403(b) or 401(k) plan cannot exceed the applicable Internal Revenue Service (IRS) dollar limits under Section 402(g) of the Internal Revenue Code (code). Also, if employer contributions are made to the TRS program on behalf of the employee, total contributions to the program and any other 403(b) plan sponsored by an employer cannot exceed the applicable IRS dollar limits under Section 415(c) of the code.					
This agreement will take effect as soon as administratively practicable following the date the member completes and returns the agreement and will remain in effect until the member changes or terminates it by submitting a new agreement. This agreement applies only to earnings not yet paid or made available to the employee and is legally binding and irrevocable with respect to amounts earned while the agreement is in effect.					
	or the employer may rev sions of the code or for a		ent at any time if necessary to	comply with applicable	
This empl		ned by both the member :	and the employer and return	ed to TRS by the	
		Member signature		Date	
		Employer signature		Date	